

## DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

Appel for Senate

IA ETHICS AND  
CAMPAIGN DISCLOSURE

PM 6:2

2010 JUN -3 AM 8:38

IMPORTANT: Indicate by # type of committee you are reporting for: ☐ (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party

(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

## CANDIDATE COMMITTEES ONLY:

Candidate Name

Staci Appel

Political Party (if applicable)

Democrat

Office Sought

State Senator

District (if Senate or House)

Senate - 37

FORM  
DR-2

(Rev. 07/2004)

DISCLOSURE  
REPORT

For Office Use Only

Comm. #

11003

Logged In

Scanned

Computer

Audited

Late reports are subject to possible civil and criminal penalties.

  
 SIGNATURE OF PERSON FILING REPORT

 515-961-2550  
 TELEPHONE

 6-2-10  
 DATE SIGNED

 I AM FILING A June 4, 2010 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
 (report date) Indicate by # ☐
☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
 (You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County &amp; Local Committees, enter County in which Election is held

## STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

 63,620.<sup>19</sup>

## ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

 4139.<sup>00</sup>

Schedule F: Loans Received total (Attach Schedule F)

0

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL .....

 67,819.<sup>19</sup>

## SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

 8662.<sup>29</sup>

Schedule F: Loan Repayments total (Attach Schedule F)

0

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)

 59,156.<sup>90</sup>

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

0

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

 100.<sup>00</sup>

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

0

CONSULTANT BREAKDOWN (Schedule G Attached?)

 YES ☒ NO

## CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

 \$ 3300.<sup>00</sup>

For Instructions, See Back of Form

# CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY</b> <b>RECEIPTS</b>
	<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Appel for Senate

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YYR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
5-15-10	ID# CHK#	Marlene Rossmann 351 W. Warren Ave. Beverington, IA 50033		\$ 44. <sup>00</sup>	<input type="checkbox"/>
5-15-10	ID# CHK#	Robert Downing 9489 Highway 65 Indianola, IA 50125		44. <sup>00</sup>	<input type="checkbox"/>
5-16-10	ID# CHK#	Marti Anderson 1717 Mar Ella Trail Des Moines, IA 50310		100. <sup>00</sup>	<input type="checkbox"/>
5-17-10	ID# CHK#	Joseph Barran 1503 48th St. Des Moines, IA 50311		100. <sup>00</sup>	<input type="checkbox"/>
5-17-10	ID# CHK#	Beverly Wilson 312 S. Spruce St. Indianola, IA 50125		10. <sup>00</sup>	<input type="checkbox"/>
5-17-10	ID# CHK#	Alicia Claypool 5754 Gallery Court West Des Moines, IA 50266		200. <sup>00</sup>	<input type="checkbox"/>
5-17-10	ID# CHK#	Kayla Gibson 305 N. 7th Indianola, IA 50125		20. <sup>00</sup>	<input type="checkbox"/>
5-18-10	ID# CHK#	Allen Farris 811 E. Salem Indianola, IA 50125		100. <sup>00</sup>	<input type="checkbox"/>
5-18-10	ID# CHK#	Linda Terry 445 NW 5th St. Earlham, IA 50072		25. <sup>00</sup>	<input type="checkbox"/>
5-18-10	ID# CHK#	Mary Jane Cassidy 107 Valley Place Indianola, IA 50125		44. <sup>00</sup>	<input type="checkbox"/>

SUB-TOTAL

\$ 737.<sup>00</sup>

TOTAL (if last page of this schedule)

\$

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 4  
(for Schedule A)

For Instructions, See Back of Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY</b> <b>RECEIPTS</b>
	<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Appeal For Senate

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 60B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MMDDYYR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
5-19-10	ID# CHK#	Lavelle Hayle 707 Robin Glen Apt. 406 Indianapolis, IA 50135		\$ 44.00	<input type="checkbox"/>
5-20-10	ID# CHK#	Andrew Mooney 850 W. Adams #6C Chicago, IL 60607		100.00	<input type="checkbox"/>
5-20-10	ID# CHK#	Stephen Koehn 9504 Horton Ave. Urbandale, IA 50330		50.00	<input type="checkbox"/>
5-20-10	ID# CHK#	Jani Wren 509 Elmwood Pl. Indianapolis, IA 50135		100.00	<input type="checkbox"/>
5-20-10	ID# CHK#	Norma Vandergool 11716 Grimes Pl. Indianapolis, IA 50135		25.00	<input type="checkbox"/>
5-20-10	ID# CHK#	Jill Rooster 1101 Stephen Ct. Indianapolis, IA 50135		100.00	<input type="checkbox"/>
5-21-10	ID# CHK#	Michael Haddox 603 W. Boston Indianapolis, IA 50135		50.00	<input type="checkbox"/>
5-22-10	ID# CHK#	Jeff Hunter 1000 Walnut St. Des Moines, IA 50309		44.00	<input type="checkbox"/>
5-24-10	ID# CHK#	John Moorlach 400 E. 15th St. Indianapolis, IA 50135		44.00	<input type="checkbox"/>
5-25-10	ID# CHK#	Lyle & Jean Middleton Trust 3920 Grand Ave. #1000 E. Des Moines, IA 50312		100.00	<input type="checkbox"/>

SUB-TOTAL

\$657.00

TOTAL (if last page of this schedule)

\$

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Page 2 of 4  
(for Schedule A)

For Instructions, See Back of Form

**CONTRIBUTIONS – MONEY TAKEN IN**  
(including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONEY RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Appel for Senate

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YYR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
5-26-10	ID# CHK#	Julie Smith 8131 Wellington Blv. Johnston, IA 50131		\$ 100. <sup>00</sup>	<input checked="" type="checkbox"/>
5-26-10	ID# CHK#	Susan Cameron 600 Brentwood Dr. Waukee, IA 50263		150. <sup>00</sup>	<input checked="" type="checkbox"/>
5-26-10	ID# CHK#	Thomas Henderson 6239 N. Winwood Drive Johnston, IA 50131		50. <sup>00</sup>	<input checked="" type="checkbox"/>
5-26-10	ID# CHK#	Jack Hatch 696-18 <sup>th</sup> St. Des Moines, IA 50314		250. <sup>00</sup>	<input checked="" type="checkbox"/>
5-26-10	ID# 6096 CHK# 2199	Manufactured Housing PAC 1400 Dean Ave. Des Moines, IA 50316		500. <sup>00</sup>	<input checked="" type="checkbox"/>
5-26-10	ID# 6059 CHK# 3449	Iowa Committee of Automotive Retailers 1111 Office Park Rd. West Des Moines, IA 50265		250. <sup>00</sup>	<input checked="" type="checkbox"/>
5-26-10	ID# 6099 CHK# 1250	Meredith Corporation Employees Fund 1716 Locust St. Des Moines, IA 50309		100. <sup>00</sup>	<input checked="" type="checkbox"/>
5-26-10	ID# 6070 CHK# 3967	Iowa Law PAC 605 E. Court Ave. Des Moines, IA 50309		200. <sup>00</sup>	<input checked="" type="checkbox"/>
5-26-10	ID# 6058 CHK# 4681	Iowa Chiropractic Society PAC 100 E. Grand Ave., Suite 240 Des Moines, IA 50309		100. <sup>00</sup>	<input checked="" type="checkbox"/>
5-27-10	ID# CHK#	David Tuckerman 3 Wellesley Court Lafayette, CA 94549		250. <sup>00</sup>	<input type="checkbox"/>

SUB-TOTAL

\$ 1950.<sup>00</sup>

TOTAL (If last page of this schedule)

\$

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(for Schedule A)

For Instructions, See Back of Form

**CONTRIBUTIONS – MONEY TAKEN IN**

(Including candidate's personal funds)



<b>SCHEDULE</b>	
<b>A</b>	<b>MONETARY RECEIPTS</b>
(Rev. 07/03)	
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Appel for Senate

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
5-27-10	ID# CHK#	Mel Heifetz 304 South 13 <sup>th</sup> St. Philadelphia, PA 19107		\$ 500. <sup>00</sup>	<input type="checkbox"/>
5-27-10	ID# CHK#	Jeffrey Schwartz 358 W. Archer Pl. Denver, CO 80233		1. <sup>00</sup>	<input type="checkbox"/>
5-28-10	ID# CHK#	Patricia Hicks 906 N C St. Indianapolis, IA 50125		44. <sup>00</sup>	<input type="checkbox"/>
5-29-10	ID# 6430 CHK# 1643	Iowa Rural Water State PAC 4331 S. 22nd Ave. E. Newton, IA 50208		250. <sup>00</sup>	<input type="checkbox"/>
	ID# CHK#				<input type="checkbox"/>
	ID# CHK#				<input type="checkbox"/>
	ID# CHK#				<input type="checkbox"/>
	ID# CHK#				<input type="checkbox"/>
	ID# CHK#				<input type="checkbox"/>
	ID# CHK#				<input type="checkbox"/>

SUB-TOTAL

\$ 795.<sup>00</sup>

TOTAL (if last page of this schedule)

\$ 4139.<sup>00</sup>

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Page 4 of 4  
(for Schedule A)

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Appel for Senate

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
5-17-10	ID# CK# 1362	Copy Plus 116 W. Ashland Indianola, IA 50125	Copies of campaign report forms	\$ 10. <sup>34</sup>
5-18-10	ID# CK# 1363	Ray Heisner 308 Plainview Dr. Indianola, IA 50125	campaign headquarters monthly rent	800. <sup>00</sup>
5-19-10	ID# CK# 1364	Matthew Peirce 620 N. 6 <sup>th</sup> St. Corliss, IA	reimbursement for pizza & pop for door knockers on 5-15-10	39. <sup>88</sup>
5-21-10	ID# CK# 1365	Andy Mastrom, Matthew Peirce 509 N. Sprague Ave. Fort Worth, TX 76111	automated calls for birthday solicitations	21. <sup>75</sup>
5-26-10	ID# CK# 1366	Senate Majority Fund 3661 Flaming Drive Des Moines, IA 50321	contribution	7000. <sup>00</sup>
5-27-10	ID# CK# 1367	Staci Appel 10901- 180 <sup>th</sup> Ave. Ackworth, IA 50001	reimbursement for parade candy	113. <sup>23</sup>
5-28-10	ID# CK# 1368	Mid American Energy P.O. Box 8030 Davenport, IA 52808	monthly utility bill for headquarters	27. <sup>59</sup>
5-29-10	ID# CK# 1369	Staci Appel 10901- 180 <sup>th</sup> Ave. Ackworth, IA 50001	mileage reimbursement for reporting period 647 miles @ .50¢	323. <sup>50</sup>
SUB-TOTAL				\$ 8338. <sup>89</sup>
TOTAL (If last page of this schedule)				\$

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(f).)

Page 1 of 2

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

# EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Appel for Senate

DATE EXPENDED (MM/DDYY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
6-1-10	ID# CK# 1370	Post Office 201 W. 1st Ave. Indianola, IA 50125	postage stamps	\$324. <sup>00</sup>
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$324. <sup>00</sup>
TOTAL (if last page of this schedule)				\$324. <sup>00</sup>

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detailed on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(b).)

Page 2 of 2

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Appel for Senate

Reset Form

SCHEDULE E (Rev. 08/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN-KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
5-18-10	Margaret Vernon 401 W. Ashland Indianapolis, IN 50135		coffee reception	\$ 100.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$	
TOTAL (if last page of this schedule)				\$ 100.00	

\*Disclosure law requires candidates to disclose the relationship of any relative making an in-kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1  
(for Schedule E)



**THIS FORM IS USED BY CANDIDATES' COMMITTEES ONLY**

SCHEDULE <b>H</b> (Rev. 07/03)	CAMPAIGN PROPERTY
ATTACH SCHEDULE H TO EACH REPORT, MAKING CHANGES AS REQUIRED.	
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Appel for Senate

Reset Form

**PART I - ONGOING INVENTORY OF CAMPAIGN PROPERTY**

**PART II - SALES OR TRANSFERS OF CAMPAIGN PROPERTY \*\***

Date Purchased (Schedule B) or Date Received (Schedule E) (MM/DD/YR)	Description of Property	Purchase Price or Est. Value When Acquired*	Current Value at Fair Market This Report
8-25-06	Dell Inspiron E1405 Core Computer	\$989. <sup>42</sup>	\$200. <sup>00</sup>
3-5-10	Mac Book Pro Computer & Printer	\$343. <sup>34</sup>	\$100. <sup>00</sup>

Date (MM/DD/YR)	Name and Address of Purchaser/Donee	Description of Property	Sold? Y/N	Sale Price	Value of Donation

TOTAL VALUE CAMPAIGN PROPERTY THIS REPORT  
(TRANSFER TO SUMMARY PAGE) \$ 2300.

If estimated, show est. beside figure.

\*\* PROPERTY SALES & TRANSFERS TOTAL  
(TRANSFER TO SUMMARY PAGE) \$ 0

(Attach Additional Schedules If Needed)

TOTALS \$ \_\_\_\_\_ \$ \_\_\_\_\_

Page 1 of 1 Pages  
(For Schedule H)